

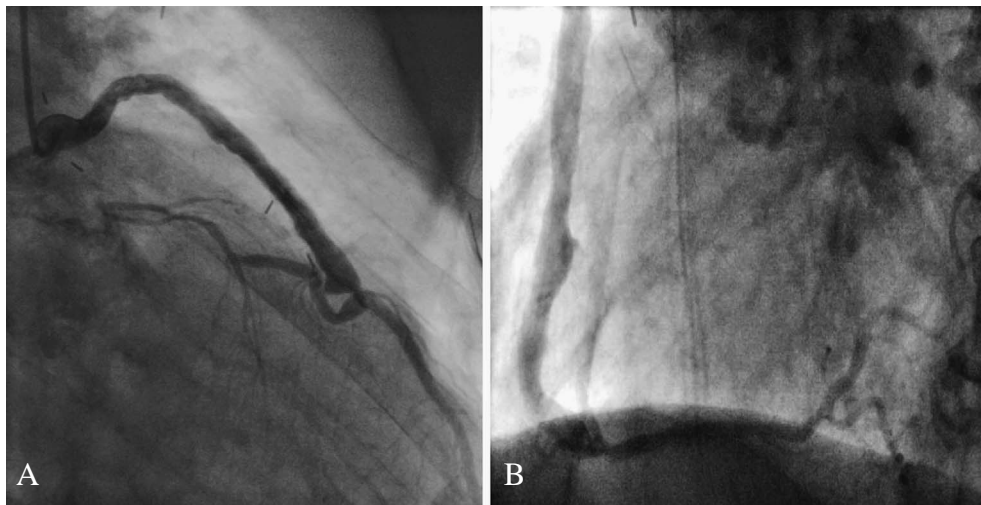
Occult Aneurysms in Aorto-coronary Saphenous Vein Grafts

Hayato Tada, Masa-aki Kawashiri, Eiichi Masuta and Masakazu Yamagishi

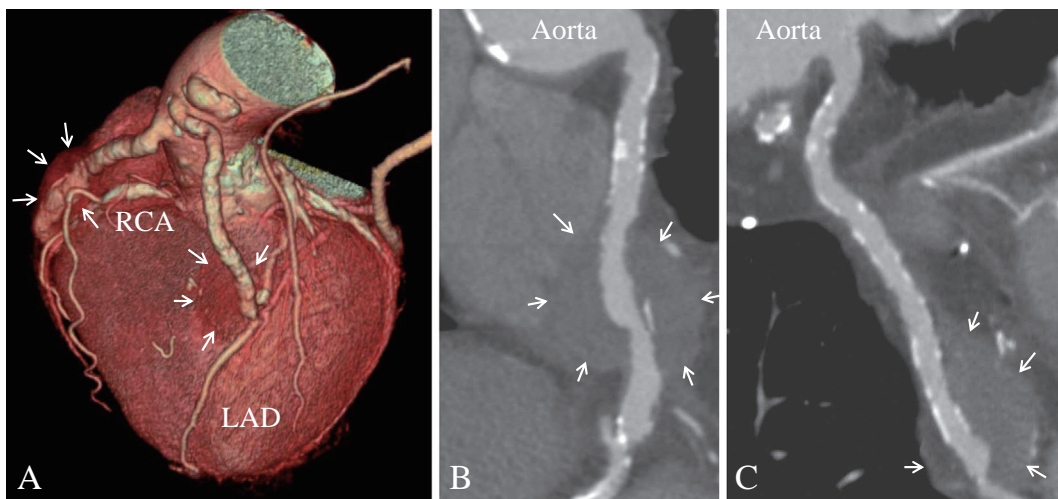
Key words: SVG, aneurysm, CABG

(Inter Med 49: 1457-1458, 2010)

(DOI: 10.2169/internalmedicine.49.3788)



Picture 1.



Picture 2.

We report a rare case of multiple saphenous vein graft aneurysms 22 years following coronary artery bypass grafting (CABG). A 51-year-old man underwent a CABG (SVG) with three SVGs to the left anterior descending artery

Division of Cardiovascular Medicine, Kanazawa University Graduate School of Medicine, Kanazawa

Received for publication April 11, 2010; Accepted for publication April 19, 2010

Correspondence to Dr. Hayato Tada, ht240z@sa3.so-net.ne.jp

(LAD), left circumflex artery (LCX), and right coronary artery (RCA), and with the left internal thoracic artery (LITA) to the diagonal branch in 1988. In 2000, he underwent redo CABG to the LCX using another SVG due to the occlusion of the initial SVG to the LCX at the age of 63. In 2010, coronary angiography (CAG) and multi-detector computed tomography (MDCT) were performed at the age of 73. MDCT, 22 years after CABG, revealed multiple SVG aneurysms with thrombosed lumens. These aneurysms were not evident by luminography methods (Picture 1). However, MDCT was useful in the detection of the rare but poten-

tially fatal postoperative complications (1, 2) observed in the present case (Picture 2).

References

1. Nishimura K, Nakamura Y, Harada S, et al. Saphenous vein aneurysm after coronary artery bypass grafting. *Ann Thorac Cardiovasc Surg* **15**: 61-63, 2009.
2. Pregowski J, Tyczynski P, Mintz SG, et al. Incidence and clinical correlates of ruptured plaques in saphenous vein grafts: an intravascular ultrasound study. *J Am Coll Cardiol* **45**: 1974-1979, 2005.